# **PATENT**



## ATTORNEY DOCKET NO. WAPH.002.04US

# IN THE UNITED SEATES PATENT AND TRADEMARK OFFICE

In re applicat	ion of: Indu Parikh et al.	) Examiner: Wehbe, Anne Marie Sabrina			
Serial No.: 1	0/029,551	) Art Unit: 1632			
Filed: Decer	mber 20, 2001	) ) ) <u>TRANSMITTAL</u>			
Title: Treatn	nent For Diabetes	) . )			
P.O. Box 145	er for Patents				
Sir:					
Trans	mitted herewith are the following documents	ments in the above-identified application:			
[ ]	Small entity status of this Application under 37 CFR 1.9 and 1.27 has been established by a Verified Declaration previously submitted.				
[ ]	A Verified Declaration of Small Entity Status Under 37 CFR 1.9 and 1.27 is enclosed.				
[X]	Response to Restriction Requirement.				
[X]	Petition for Extension of Time (1 month).				
Also	enclosed:				
[X]	Return postcard (postage prepaid).				

## **CERTIFICATE OF FIRST CLASS MAILING**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

(Date of Deposit)

(Signature)

(Printed Name)

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The fees have been calculated as shown below:

Claims	Prev.	Current	<u>Extra</u>	Small E	Entity	Large En	<u>tity</u>
Total:	32	31	0	x \$9 =	\$0.00	x \$18 =	\$0.00
Indep:	8	12	4	x \$43 =	\$172.00	x \$86 =	\$0.00
Mult:	у	y			\$0.00		\$0.00

Total Additional Claims Fee: \$172.00

sion of Time Fee	Small Entity	Large Entity	
One Month	\$ 55.00	\$ 110.00	
Two Months	\$210.00	\$ 420.00	
Three Months	\$475.00	\$ 950.00	
Four Months	\$740.00	\$1480.00	
Five Months	\$1,005.00	\$2,010.00	
	One Months Two Months Three Months Four Months	One Month       \$ 55.00         Two Months       \$210.00         Three Months       \$475.00         Four Months       \$740.00	

Total Extension of Time Fee: \$ 55.00

Other fees (list individually):

Total Other Fees: \$ 0.00
Terminal Disclaimer / 37 CFR 1.20(d) \$ 0.00
TOTAL FEES: \$ 227.00

- [X] A credit card authorization for the amount of the above-indicated TOTAL FEES is attached.
- [ ] Please charge Deposit Account No. 18-0020 in the amount of the above-indicated TOTAL FEES.
- [ ] No fee is required.

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- Conditional Petition for Extension of Time: An extension of time is requested in the [X] present and/or the above-referenced parent application to provide for timely filing if an extension of time is still required after all papers filed with this transmittal have been considered.
- The Commissioner is hereby authorized to charge any underpayment of the following [X]fees associated with this communication, including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 18-0020.
  - [X] Any filing fees under 37 CFR 1.16 for the presentation of extra claims.
  - [X]Any parent application processing fees under 37 CFR 1.17.
- A duplicate copy of this sheet is attached for accounting purposes. [X]

Respectfully submitted,

Dated: Sentonber 13, 2004

Barbara Rac-Venter, Ph.D.

Reg. No. 32,750

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BRV/mnb